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April 30, 2020

The Honorable Richard Neal  
Chairman  
House Ways and Means Committee  
United States House of Representatives  
Washington D.C. 20515

The Honorable Nita Lowey  
Chairwoman  
House Appropriations Committee  
United States House of Representatives  
Washington D.C., 20515

The Honorable Frank Pallone  
Chairman  
House Energy and Commerce Committee  
United States House of Representatives  
Washington D.C. 20515

Chairman Neal, Chairwoman Lowey, and Chairman Pallone:

Americans across this country need more assistance as the COVID-19 outbreak has now infected over 3 million people worldwide, health care workers are working overtime without adequate protection, and nearly every health care system in the United States is struggling financially. It is clear that the next COVID-19 specific package, or “package four,” must include expanded protections and support for our health care systems and the health of our nation.

Since the outbreak began, I have been working closely with Iowans to ensure that our state is able to care for all of our citizens. I have heard from the entire spectrum of health care – from patients to doctors to hospital administrators and more. During this public health emergency, we must do more to support our health care partners who are on the front lines of protecting our citizens.

In conversations with frontline health care professionals across my district, they have all shared with me that there is simply not enough personal protective equipment (PPE). That is why we need to immediately address getting PPE into Iowa. As you might have seen, Iowa has some of the fastest-growing outbreaks of COVID-19 in the country right now. I know that the best way to thank and support our health care workers is to protect them at work. That is why I have called on the President to authorize the Defense Protection Act to make PPE, wrote to the United States Trade Representative (USTR) to request that medical equipment be our first trading priority, and signed onto legislation that would boost PPE production in the United States. Still, more must be done.

Our frontline health care workers are putting their health and safety on the line to work without this protection, which is why we must pay them for their service. Our next legislative package should include specific hazard pay for our hospital and health care workers during this time. I’ve

heard from nurses, health care administrative staff, doctors, and more who have had to rent an apartment to keep their family safe, have their spouse leave their job to take over caring for their children, and otherwise make huge sacrifices to keep themselves and their families safe. Health care staff across this country must be financially compensated for the dangerous and extreme working conditions there are currently facing.

I remain concerned that COVID-19 “hotspots” have become the focus for getting supplies and testing. In order to stay ahead of this outbreak, we need to ensure that Iowa and other states have adequate PPE supplies. We cannot find ourselves in a situation where we are “chasing” the outbreak from hotspot to hotspot, and instead focus on prevention and stopping this spread. I want to ensure equitable access to COVID-19 testing to states like Iowa as well as ensure access to COVID-19 antibody testing once that becomes available. Despite the Administration’s claims, there is not enough testing across this country. Not everyone in Iowa, or across the country, is able to get a test. COVID-19 doesn’t abide by state lines. The best way to protect our citizens is to ensure all states are prepared. This upcoming package should include language to ensure Iowa is able to access testing and supplies on an equitable level to any other state.

One of the most detrimental things that could hamper our response to COVID-19 would be if our hospitals and health clinics were forced to close. Due to increased costs associated with COVID-19, hospitals and health care facilities are facing financial insolvency. Hospitals from across my district that I’ve spoken with have all raised concerns that they will have to cut salaries, furlough workers, and possibly risk having to close their doors.

That is why I am calling for our next stimulus package to include: 1) a requirement to HHS to immediately distribute funding Congress provided in previous funding packages, the majority of which has still not be distributed; 2) increasing direct assistance to hospitals across this country; 3) no-interest loans to hospitals and clinics; 4) eligibility for small health clinics and hospitals in the Paycheck Protection Program (PPP); 5) creating a COVID-19 hospital debt-forgiveness program; and, 6) allowing for immediate and emergency conversions of any rural health care clinic into a Critical Access Hospital. We cannot allow any health care provider who is serving our communities to close their doors during this pandemic, and we must provide them with the assurances that financial assistance is coming.

Our rural health care workers are also in need of our support. Small, public hospitals do not qualify for PPP and are in dire risk of having to lay off staff. We must immediately pass legislation to clarify that PPP applies to our rural hospitals, which will ensure funding for rural health care facilities. This will give our rural health care sectors the financial security they need to remain open during this outbreak, and in turn ensures our health care workers continue to serve their communities.

As another important part of our healthcare system, we must ensure that our pharmacies are protected and supported. We must eliminate all DIR fees on independent pharmacies, which was already a predatory practice before COVID-19 but now threatens the very survival and existence of our pharmacies to serve communities in this crisis. We must empower and authorize pharmacists to: conduct therapeutic interchange and substitution without physician authorizations when prescription shortages arise; order, collect, conduct, and interpret necessary

tests; and, when needed, prescribe treatment for illnesses like the flu or strep throat and allow for immunizations, which would both ensure faster access to care for patients while helping reduce demand and workload on doctors and health systems at this time.

And finally, we must do more to expand access to telehealth across this country. We cannot force patients to choose between staying safe and attending important health care appointments. That is why I have introduced bipartisan legislation that would expand telehealth to physical therapists, occupational therapists, speech pathologists, audiologists, and clinical social workers, and I would ask that legislation is included in the next package. Additionally, we need to expand telehealth access for mental health, behavioral health, nutrition, disease and illness management, and so many more necessary health care services that keep Americans healthy. Prevention is often the best medicine, which is why it is so important to ensure that these services are accessible.

Sincerely,

A handwritten signature in blue ink, reading "Cindy Axne". The signature is fluid and cursive, with the first name "Cindy" and last name "Axne" clearly distinguishable.

Cindy Axne  
Member of Congress